

# CUMMINS INC Reported by SMITH MARK ANDREW

## FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 10/08/25 for the Period Ending 10/06/25

Address 500 JACKSON ST

BOX 3005 MAIL CODE 93050 COLUMBUS, IN, 47202-3005

Telephone 8123773842

CIK 0000026172

Symbol CMI

SIC Code 3510 - Engines And Turbines

Industry Auto, Truck & Motorcycle Parts

Sector Consumer Cyclicals

Fiscal Year 12/31

## FORM 4

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

☑ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL
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# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				2.	Issue	er Nam	ne and Tic	ker (	or Trad	ing Sym	bol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Smith Mark Andrew					UM	MIN	S INC [	CN	MI]				, ,	100		
(Last) (First) (Middle)				3.	3. Date of Earliest Transaction (MM/DD/YYYY)							Director10% Owner  _X Officer (give title below) Other (specify below)  VP - Chief Financial Officer				
500 JACKSON STREET							10	/6/2	2025			VI - CILICI FI	nanciai C	Jilicei		
	(Stre	eet)		4.	If Ar	nendm	ent, Date	Orig	ginal Fi	led (MM/	DD/YYYY)	6. Individual	or Joint/G	roup Filing	(Check Appl	icable Line)
COLUMBUS, IN 47201												X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(0	City) (Sta	ate) (Zip	)									Form fried by	More man C	one Reporting P	erson	
								•		•		neficially Owne			6.	T
1. Title of Security (Instr. 3) 2. Trans. Date				I			3. Trans. Co (Instr. 8)	de	e 4. Securities Acquir Disposed of (D) (Instr. 3, 4 and 5)		ired (A) or	(A) or 5. Amount of Secur Following Reported (Instr. 3 and 4)		rities Beneficially Owned d Transaction(s)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
							Code	V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(msu. 4)
Common 10/6/2025							M		8,000	A	\$142.12			39,582	D	
Common			10/6/	2025			S		8,000	D S	8439.3002 <sup>(1)</sup>			31,582	D	
	Tal	ole II - Deri	ivative Sec	urities	Ben	eficial	ly Owned	(e.g	g., puts	, calls, w	varrants,	options, conve	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)	Deriva Acquir Dispos				6. Date Exercisable and Expiration Date					Beneficially Owned Following	Form of Derivative Security: Direct (D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Da Ex	ite ercisable	Expiration Date	<sup>n</sup> Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	
Stock Option (Right-to-Buy)	\$142.12	10/6/2025		M			8,000	4/	/6/2023	4/6/2030	Common	8,000	\$0	13,310	D	

#### **Explanation of Responses:**

(1) The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$439.00 - \$439.91. The reporting person undertakes to provide to Cummins Inc., any security holder of Cummins Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range indicated.

#### **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Smith Mark Andrew								
500 JACKSON STREET		VP - Chief Financial Offi		•				
COLUMBUS, IN 47201								

### Signatures

/s/ Nicole Y. Lamb-Hale, Attorney-in-Fact 10/8/2025

\*\*Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.